

<i>SERFF Tracking Number:</i>	<i>GARD-125842534</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Berkshire Life Insurance Company of America</i>	<i>State Tracking Number:</i>	<i>40529</i>
<i>Company Tracking Number:</i>	<i>NO PRESUMPTIVE</i>		
<i>TOI:</i>	<i>H111 Individual Health - Disability Income</i>	<i>Sub-TOI:</i>	<i>H111.003 Long Term - Unrelated to marketing with employer or association groups</i>
<i>Product Name:</i>	<i>Endorsement to Delete Presumptive Disability Benefit</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Filing at a Glance

Company: Berkshire Life Insurance Company of America

Product Name: Endorsement to Delete SERFF Tr Num: GARD-125842534 State: ArkansasLH

Presumptive Disability Benefit

TOI: H111 Individual Health - Disability Income SERFF Status: Closed State Tr Num: 40529

Sub-TOI: H111.003 Long Term - Unrelated to Co Tr Num: NO PRESUMPTIVE State Status: Approved-Closed
marketing with employer or association groups

Filing Type: Form	Co Status:	Reviewer(s): Rosalind Minor
	Author: Cindy Ego	Disposition Date: 10/15/2008
	Date Submitted: 10/13/2008	Disposition Status: Approved-Closed
		Closed

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name:	Status of Filing in Domicile: Pending
Project Number:	Date Approved in Domicile:
Requested Filing Mode: Review & Approval	Domicile Status Comments:
Explanation for Combination/Other:	Market Type: Individual
Submission Type: New Submission	Group Market Size:
Overall Rate Impact:	Group Market Type:
Filing Status Changed: 10/15/2008	
State Status Changed: 10/15/2008	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	
Re: Berkshire Life Insurance Company of America	
NAIC: 71714 FEIN: 75-1277524	
Individual Disability Income	
Policy Endorsement: 1425-E (09/08)	

SERFF Tracking Number: GARD-125842534 State: Arkansas
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Company Tracking Number: NO PRESUMPTIVE
TOI: H111 Individual Health - Disability Income Sub-TOI: H111.003 Long Term - Unrelated to marketing
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Product Name: Endorsement to Delete Presumptive Disability Benefit
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Berkshire Life Insurance Company of America is submitting the above form for your review and approval. This form is filed concurrently in our state of domicile, Massachusetts.

Endorsement form 1425-E (09/08) deletes the Presumptive Total Disability Benefit from policies that are underwritten on a Guaranteed Standard Issue basis. The Company intends to utilize the supplemental Policy Endorsement with Policy Forms 1400 (03/07) and 1500 (03/07) which were approved in your state on 06/27/2007.

Upon your review of the submitted material please feel free to contact me if you have any questions

Company and Contact

Filing Contact Information

Cindy Ego, Compliance Specialist
700 South Street (413) 395-4319 [Phone]
Pittsfield, MA 01201

Filing Company Information

Berkshire Life Insurance Company of America	CoCode: 71714	State of Domicile: Massachusetts
700 South Street	Group Code:	Company Type:
Pittsfield, MA 01201	Group Name:	State ID Number:
(413) 499-4321 ext. [Phone]	FEIN Number: 75-1277524	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$75.00
Retaliatory?	Yes
Fee Explanation:	1 form @ \$75.00
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Berkshire Life Insurance Company of America	\$75.00	10/13/2008	23148264

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	10/15/2008	10/15/2008

SERFF Tracking Number: *GARD-125842534* *State:* *Arkansas*
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TOI: *H111 Individual Health - Disability Income* *Sub-TOI:* *H111.003 Long Term - Unrelated to marketing
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Project Name/Number: */*

Disposition

Disposition Date: 10/15/2008

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice	Approved-Closed	Yes
Supporting Document	Application	Approved-Closed	Yes
Supporting Document	Health - Actuarial Justification	Approved-Closed	Yes
Supporting Document	Outline of Coverage	Approved-Closed	Yes
Form	Policy Endorsement	Approved-Closed	Yes

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Company Tracking Number: NO PRESUMPTIVE

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Product Name: Endorsement to Delete Presumptive Disability Benefit

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Form Schedule

Lead Form Number: 1425-E (09/08)

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed	1425-E (09/08)	Policy/Cont	Policy Endorsement	Initial		50	1425-E (09-08).pdf
			ract/Fratern				
			al				
			Certificate:				
			Amendmen				
			t, Insert				
			Page,				
			Endorseme				
			nt or Rider				

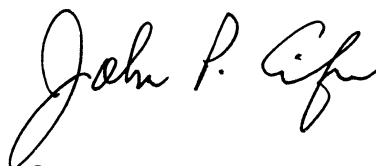
Berkshire Life Insurance Company of America
700 South Street
Pittsfield, MA 01201

POLICY ENDORSEMENT

This endorsement is a part of the Policy to which it is attached. All provisions of the Policy apply to this endorsement and remain the same except where We change them by this endorsement.

The Presumptive Total Disability Benefit in the Policy to which this endorsement is attached is hereby deleted.

Berkshire Life Insurance Company of America

A handwritten signature in black ink, appearing to read "John P. Aifu". The signature is fluid and cursive, with a large initial "J" and a distinct "P".

Secretary

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Rate Information

Rate data does NOT apply to filing.

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Supporting Document Schedules

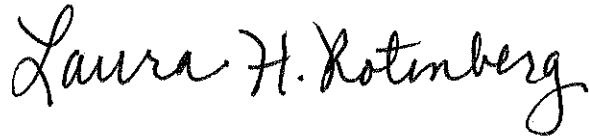
Satisfied -Name:	Certification/Notice	Review Status:	Approved-Closed	10/15/2008
Comments:				
Attachment:				
FLESCH CERTIFICATION.pdf				
Bypassed -Name:	Application	Review Status:	Approved-Closed	10/15/2008
Bypass Reason:	N/A - This is only an endorsement filing.			
Comments:				
Bypassed -Name:	Health - Actuarial Justification	Review Status:	Approved-Closed	10/15/2008
Bypass Reason:	n/a - no rates affected.			
Comments:				
Bypassed -Name:	Outline of Coverage	Review Status:	Approved-Closed	10/15/2008
Bypass Reason:	n/a - endorsement filing only.			
Comments:				

Berkshire Life Insurance Company of America
700 South Street
Pittsfield MA 01201

CERTIFICATION

This is to certify that the policy form listed below complies with the readability ease standards of the Life and Health Policy Language Simplification Act, Section 5a.

<u>Form Number</u>	<u>Syllables</u>	<u>Words</u>	<u>Sentences</u>	<u>Flesch Score</u>
1425-E (09/08)	88	52	4	50.1



Laura H. Rotenberg
Second Vice President and Counsel